*5:AO 240 (Rev. 10/03)

	Unitei	STATES I	DISTRICT C	QURT	
		District	of MAGSAC	HUSETTS	
	Plaiutiff V.	1	OISTRICT C OF MAGNET APPLICATION WITHOUT PRESENTED	3: 28 TO PROCEED PROCEED TOAVIT	
	Defendant	(CASE NUMBER:		
Ι, _	declare that I am the (check appropriate box) petitioner/plaintiff/movant □ other				
XI	oetitioner/ <u>plaintiff/</u> movant	□ other			
und	he above-entitled proceeding; that .n s er 28 USC §1915 I declare that I am un ght in the complaint/petition/moticn.	upport of my req able to pay the co	uest to proceed wi ests of these procee	ithout prepayment of fees or costs edings and that I am entitled to the relief	
In s	upport of this <mark>application, I ans</mark> wer the	- ·	• •	y of perjury:	
1.	Are you currently incarcerated?			(If "No," go to Part 2)	
	If "Yes." state the place of your incar	rceration			
	Are you employed at the institution? Do you receive any payment from the institution?				
	Attach a ledger sheet from the institutions.	ition(s) of your ir	carceration showi	ing at least the past six months'	
2.	Are you currently employed?	□ Yes	🔁 No		
	a. If the answer is "Yes," state the an and address of your employer.	mount of your tak	e-home salary or v	wages and pay period and give the name	
2/26 2/11/ 3.	b. If the answer is "No," state the da and pay period and the name and eck dafe influes For period thed durlings For Box 66/00 In the past 12 twelve months have yo	nte of your last em d address of your dending 9/30 d, Chicago 14 60 ou received any n	ployment, the amore last employer. Last employer. Last 2, 153, 2666 . Terminoney from any of	ount of your take-home salary or wages yet work day 10/8/02 Irronth (= \$446 Perdiem) a ked 8/29/63 It the following sources?	
	 a. Business, profession or other set b. Rent payments, interest or divid c. Pensions, annuities or life insura d. Disability or workers compensa e. Gifts or inheritances f. Any other sources 	ends ance payments	⊠ Yes ⊠ Yes ⊠ Yes ⊠ Yes □ Yes ∇YYes	☐ No	

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

6. \$199.08 ended whitefood b. \$21,25 ended Interest on rent de posit
C., mettife \$810, ended
d. workers comp. \$865.94 united airlines ended march 2003,
WEEDER THO MO LIFE INSUR OF WHITERICA - EXPECT TO AND INORTH OF APRIL 2000
f other some PO CT GEN & LIFE, INS - I don't know durationend (ason ve?)
Disability \$740, mo LIFE INSUK OF KINGERICA - Expect, to end ingreh or neril 2004 HIFE DISAB \$370 MO CT GEN'L LIFE INS - I don't know durationend (asokve?) f. other source - unemployment \$9,000 ended 1. Do you have any cash or checking or savings accounts? [XYes] No
If "Yes," state the total amount. \$2.30 (Awo hundred and thirty)
5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? Yes No
If "Yes." describe the property and state its value.
6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.
NC,10
I declare under penalty of perjury that the above information is true and correct.
and correct.
2/22/04
2/23/04 Blave Signature of Applicant
Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.